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20995 7590 03/28/2007

KNOBBE MARTENS OLSON & BEAR LLP

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(Depositor's name (Sign (Date)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 10/770,712 02/03/2004 Aristo Voidani IMSC12.008A 2285

TITLE OF INVENTION: IDENTIFICATION OF ETIOLOGY OF AUTISM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	· YES	\$700	\$300	\$0	\$1000	06/28/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
. CHEU, CHANGHWA J		1641	514-183000				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 563). Change of correspondence address (or Change of Correspondence Address from PTO/SB/1/22) attached. Address from PTO/SB/1/22 hatsched. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/1/2, Rev 03-0/2 or more recent) attached. Use of a Customer Number is required:			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is isted, no name will be printed.		and Bear,	ı Knobbe, Martens, Olson and Bear, LLP	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the parent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

IMMUNOSCIENCES LAB., INC.

Beverly Hills, California

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity 📮 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee A check is enclosed. Dublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038- is attached.

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5. Change in Entity Status (from status indicated above)

Advance Order - # of Copies _____10

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer elaiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trudemark Office.

June 27, 2007 Authorized Signature Date

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